



## Relocation Eligibility Report

|                |             |
|----------------|-------------|
| Project Title: | Parcel No.: |
|----------------|-------------|

There are persons and/or personal property that will be required to move from this parcel as a result of its acquisition. Complete information below and transmit **immediately** to the Region Relocation Supervisor for Processing.

The date of **Initiation of Negotiations** \_\_\_\_\_

| Name / Address / Telephone | Date Parcel was First Occupied by this Person or Personal Property |
|----------------------------|--|
| Owner(s):                  |  |
|                            |  |
|                            |  |
| Tenant(s):                 |  |
|                            |  |
|                            |  |
|                            |  |
|                            |  |
|                            |  |
|                            |  |

**Note:** An Occupancy Survey must be completed for each party named above.

Region Relocation Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Relocation Specialist \_\_\_\_\_ Date \_\_\_\_\_

Negotiator \_\_\_\_\_ Date \_\_\_\_\_

Date to HQ \_\_\_\_\_